

CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/07
VAT. No. 4880189685



SUBBD27409678

Sender's Details		Consignee's Details. Full Street Address Please			
Company Name LE CREUSET		Company Name Le creuset Stellenbosch			
Street Address SHOP IM 30A CLEARWATER MALL CHRISTIAN DE WET ROAD JOHANNESBURG		Street Address Unit 7 Oude Hoek CNR Church of Andringa Stellenbosch			
Suburb JOHANNESBURG		Suburb			
City / Town JNB Postal Code 2001		City / Town Cape Town		Postal Code 7140	
Contact ELLEN Phone 011 475 1202		Contact			
Phone 011 475 1202		Phone 213 003 168			
Destination Country <input checked="" type="checkbox"/> South Africa <input type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify)		Analysis Code			
Sender's Reference					
SPECIAL INSTRUCTIONS					
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please)			
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.14 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 14.5 OVERLEAF). IF YOU WISH DSV DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 14.5, 14.6 AND 14.7 OVERLEAF).					
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number			
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)	
				WIDTH (CM)	
				HEIGHT (CM)	
Goods received in full without damage (unless endorsed)					
Name Of Receiver (PLEASE PRINT CLEARLY) Leandre					
Date Received: 23 07 18		Time Received: 09:51			
Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>			
Received By DSV					
Name Of Courier (PLEASE PRINT CLEARLY)					
Date Received: 23 07 18		Time Received: 12:37			
Signature: <i>[Signature]</i>					

Mark Service Required
Same Day
Express <input checked="" type="checkbox"/>
With Sunrise Option
With Saturday Service
Public Holiday Service
Economy
After Hours
BLNS Customs Tariff
1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>
Total Mass (Kg)

POD COPY

Version Control (08/2017)

